



MISSISSIPPI STATE DEPARTMENT OF HEALTH

MERS-CoV Healthcare Provider Information—June 2, 2014

- As of May 28, 2014, there are 636 lab-confirmed cases reported to the WHO with 193 deaths due to MERS-CoV infection.
- Onsets range from April 2012 to May 2014
- Two Imported Cases of MERS in the US, both identified in May 2014
 - To date, there is no documented transmission in the US from either of the reported cases.
 - After investigation, a close contact to one of the imported cases did not have MERS-CoV infection.
- All reported cases have been directly or indirectly linked to countries in and around the Arabian Peninsula
 - Most reported cases have occurred in residents living in and around Arabian Peninsula
 - Travel-associated cases to several countries, including US
- Most confirmed infections have severe acute respiratory illness
 - Symptoms and presentation: Fever, cough, shortness of breath, pneumonia
 - 30% have died
 - Some have no symptoms or mild respiratory illness
- Limited person-to-person transmission, mainly after close and prolonged contact
 - No evidence of sustained ongoing transmission
 - Clusters of person-to-person spread most frequently in healthcare workers caring for MERS patient
- No vaccine at present
- No specific antiviral treatment
- Healthcare professionals should follow CDC infection control recommendations and wear appropriate personal protective equipment when evaluating patients for MERS-CoV infection. They should evaluate patients for MERS-CoV infection who:
 - have fever and pneumonia or acute respiratory distress syndrome (ARDS), and either
 - a history of travel from countries in or near the Arabian Peninsula within 14 days before symptom onset, or
 - have had close contact with a symptomatic traveler who developed fever and acute respiratory illness (not necessarily pneumonia) within 14 days after traveling from countries in or near the Arabian Peninsula, or
 - are part of a cluster of patients with severe acute respiratory illness of unknown etiology in which MERS-CoV is being evaluated
 - have had close contact with a confirmed or probable case of MERS while the person was ill, in consultation with state and local health departments.

- Patients with lower respiratory illness should also be evaluated for other causes of community acquired pneumonia
- The Mississippi State Department of Health Public Health Laboratory has the capacity to perform MERS-CoV testing by PCR for multiple specimen types.
 - The MPHL MERS-CoV Specimen Submission Guidelines are available at www.HealthyMS.com/MERS
 - **Prior authorization must be arranged with the MSDH Office of Epidemiology before specimens will be accepted for submission and testing.**
- Healthcare providers should adhere to recommended infection control measures, including standard, contact, and airborne precautions, while managing symptomatic close contacts, patients under investigation, and patients who have probable or confirmed MERS-CoV infections. Recommended infection control precautions should also be utilized when collecting specimens
 - Any patient seeking care for symptoms consistent with MERS-CoV infection should be immediately placed in a private room with the door closed until an isolation room can be arranged.
 - Evaluation and care of the patient should be performed using standard, contact, and airborne precautions while awaiting confirmation of diagnosis.
 - Place a facemask on the patient whenever the patient is outside of the isolation room.
 - Healthcare personnel should use eye protection in addition to disposable gowns, gloves, and respiratory protection when entering the isolation room
 - Patient care equipment, such as stethoscopes and blood pressure cuffs, should be dedicated to the isolation room and not moved from room to room.
 - The patient care environment should be cleaned using an Environmental Protection Agency-registered hospital disinfectant, applied according to label instructions, with attention to toilets and frequently touched surfaces.
 - See Interim Infection Prevention and Control Recommendations for Hospitalized Patients with MERS-CoV for more information:
<http://www.cdc.gov/coronavirus/mers/infection-prevention-control.html>
- Any suspected case should be reported to the MSDH Office of Epidemiology.
 - **To report a suspect case or arrange for clinical testing, please contact MSDH Epidemiology at (601) 576-7725 during normal business hours or (601)576-7400 after hours**

See the CDC website at <http://www.cdc.gov/coronavirus/mers/index.html> for updates and guidance for healthcare professionals. You may also see the MSDH website at www.HealthyMS.com/MERS for updates and information.